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Abstract

Child malnutrition is persistent in many developing countries and is a serious problem. Shekar, Heaver and Lee (2006) found that “nearly one-third of children in the developing world are either underweight or stunted, and more than 30 percent of the developing world's population suffers from micronutrients deficiencies” (p. ix). Children who have poor nutrition can't do well in school, thus lowering their human capital (Aguero, et al. 2010); however, better nutrition has a significant impact on the health of children as well as their physical, and mental developmental (Plagerson, Patel, Harpham, Kielmann and Mathee 2010; Manley, Gitter, and Slavchevska (2012)). These studies show that there is a pressing need to take action in order to improve the nutritional status of children. Some countries have adopted cash transfers to needy households as solution to this problem. Manley et al. (2012) suggest that government cash transfers to poor households increase their effective resources, therefore providing them with increased possibilities to afford more food which in turn affects the nutritional status of children. The South African Child Support Grants (CSGs) are designed to increase the nutrition, health and education of the children of poor families (Aguero, Carter and Woolard 2006). Based on the theory of Manley et al.(2012) of the origins of child nutritional status and potential interventions, this paper evaluates the impact of the CSG on children's nutritional status using the 2008 South African National Income Dynamics Study (NIDS) survey, which is publicly free and available. The preliminary results suggest that larger households are more likely to receive CSG and that female household heads are more likely to receive CSG than male household heads. Moreover, household heads who have secondary education levels are more likely to receive CSG compared to those who did not attend school. The CSG cash transfers are significantly associated with lower height and weight for age z-scores; however, the associations are not significant when additional variables are added to the linear regression models. Aguero et al. (2006) have looked at the impact of CSG on children's nutrition using the KwaZulu-Natal survey dataset (KIDS) while this paper uses the NIDS data which is more recent. Since the data is observational, a regression adjustment method will be used to capture the treatment effect of CSG on children's nutritional status.

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